


**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| | |
|------------------------|---|
| Attorney Docket No. | 6639P008 |
| First Inventor | Toshiyuki Tanaka, et al. |
| Title | A Multi-Functional Electronic Device with a Continuously Accessible Pointing Device |
| Express Mail Label No. | EV323393065US |

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO:
 Mail Stop Patent Application
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
 See 37 CFR 1.27.
3. Specification *[Total Pages 35.]*
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table,
 or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings *(if filed)*
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) *(35 U.S.C. 113)* *[Total Sheets 8.]*
5. Oath or Declaration (signed) *[Total Pages 6.]*
 a. Newly executed (original or copy)
 b. Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 18 completed)
 i. **DELETION OF INVENTOR(S)**
 Signed statement attached deleting inventor(s)
 named in the prior application, see 37 CFR
 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76
7. CD-ROM or CD-R in duplicate, large table or
 Computer Program *(Appendix)*
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
- a. Computer Readable Form (CRF)
 b. Specification Sequence Listing on:
 i. CD-ROM or CD-R (2 copies); or
 ii. paper
- c. Statements verifying identity of above copies
9. Assignment Papers (cover sheet & document(s))
10. 37 C.F.R. § 3.73(b) Statement Power of Attorney
(when there is an assignee)
11. English Translation Document *(if applicable)*
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS
 Citations
13. Preliminary Amendment Application Amended
 to Reflect Claim of Priority
14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).
 Applicant must attach form PTO/SB/35 or its equivalent.
17. Other: _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP)

of prior application No: _____

Prior application Information: Examiner _____ Unassigned

Group/Art Unit: Unassigned

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS Customer Number

08791

or Correspondence address below

| | | | | | |
|---------|--|-----------|----------------|----------|----------------|
| Name | Blakely, Sokoloff, Taylor & Zafman LLP | | | | |
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| City | Costa Mesa | State | California | Zip Code | 92626 |
| Country | | Telephone | (714) 557-3800 | Fax | (714) 557-3347 |

| | | | |
|-------------------|-------------------|-----------------------------------|--------|
| Name (Print/Type) | William W. Schaal | Registration No. (Attorney/Agent) | 39,018 |
| Signature | | | |

FEE TRANSMITTAL

for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$ 962.00)

| Complete if Known | |
|----------------------|-------------------|
| Application Number | |
| Filing Date | November 18, 2003 |
| First Named Inventor | Toshiyuki Tanaka |
| Examiner Name | Unassigned |
| Group/Art Unit | Unassigned |
| Attorney Docket No. | 6639P008 |

METHOD OF PAYMENT (*check all that apply*)

| | | | | |
|---|--------------------------------------|--------------------------------------|--------------------------------|-------------------------------|
| <input checked="" type="checkbox"/> Check | <input type="checkbox"/> Credit card | <input type="checkbox"/> Money Order | <input type="checkbox"/> Other | <input type="checkbox"/> None |
| <input checked="" type="checkbox"/> Deposit Account | | | | |

**Deposit
Account
Number** 02-2666

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments

Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

Charge fee(s) indicated below, except for the filing fee
to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | | Small Entity | | | Fee Paid |
|---------------------|----------|--------------|----------|------------------------|--------------------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | |
| 1001 | 770 | 2001 | 385 | Utility filing fee | 770.00 |
| 1002 | 340 | 2002 | 170 | Design filing fee | |
| 1003 | 530 | 2003 | 265 | Plant filing fee | |
| 1004 | 770 | 2004 | 385 | Reissue filing fee | |
| 1005 | 160 | 2005 | 80 | Provisional filing fee | |
| SUBTOTAL (1) | | | | | (\$) 770.00 |

2. EXTRA CLAIM FEES

| Total Claims | | Claims | Variation below | Fee Paid |
|-----------------------|---------|-------------------|--------------------|-----------------------------------|
| Independent Claims | 24 3 | 20* = 4 3* = 0 | X X | 18.00 = \$72.00 86.00 = \$0.00 |
| Multiple Dependent | | | | = |

| Large Entity | | Small Entity | | |
|--------------|----------|--------------|----------|---|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | <u>Fee Description</u> |
| 1202 | 18 | 2202 | 9 | Claims in excess of 20 |
| 1201 | 86 | 2201 | 43 | Independent claims in excess of 3 |
| 1203 | 290 | 2203 | 145 | Multiple Dependent claim, if not paid |
| 1204 | 86 | 2204 | 43 | **Reissue independent claims over original patent |
| 1205 | 18 | 2205 | 9 | **Reissue claims in excess of 20 and over original patent |

**or number previously paid, if greater. For Reissues, see below.*

SUBMITTED BY

| | | | | | |
|-------------------|---|--------------------------------------|--------|-----------|----------------|
| Name (Print/Type) | William W. Schaal | Registration No. (Attorney/Agent) | 39,018 | Telephone | (714) 557-3800 |
| Signature |  | | | Date | 11/18/03 |

Based on PTO/SB/17 (08-03) as modified by Blakely, Solokoff, Taylor & Zafman (wlr) 08/11/2003.
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